



Complete Summary

TITLE

Acute care prevention of falls: rate of inpatient falls per 1,000 patient days.

SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Prevention of falls (acute care). Health care protocol. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2008 Mar. 26 p. [37 references]

Measure Domain

PRIMARY MEASURE DOMAIN

Outcome

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure is used to assess the rate of inpatient falls per 1,000 patient days.

RATIONALE

The priority aim addressed by this measure is to eliminate all falls with injury in the acute care setting.

PRIMARY CLINICAL COMPONENT

Acute care; falls; prevention

DENOMINATOR DESCRIPTION

1,000 patient days

NUMERATOR DESCRIPTION

Total number of inpatient falls within 1,000 patient days

Evidence Supporting the Measure**EVIDENCE SUPPORTING THE CRITERION OF QUALITY**

- A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

Evidence Supporting Need for the Measure**NEED FOR THE MEASURE**

Unspecified

State of Use of the Measure**STATE OF USE**

Current routine use

CURRENT USE

Internal quality improvement

Application of Measure in its Current Use**CARE SETTING**

Hospitals

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Advanced Practice Nurses
Nurses
Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

TARGET POPULATION AGE

Adults

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

Current data on fall rates in acute care hospitals are far from complete. Massachusetts recently publicly reported average rates of 3.57 falls/1,000 patient days in hospitals of 200-299 beds, and 4.76 falls/1,000 patient days in hospitals over 500 beds. Injuries from falls were 0.96/1,000 patient days and 0.64/1,000 patient days, respectively, on medical units.

The National Health Service of the United Kingdom reports an average fall rate of 4.8 falls/1,000 patient days nationwide.

EVIDENCE FOR INCIDENCE/PREVALENCE

Institute for Clinical Systems Improvement (ICSI). Prevention of falls (acute care). Health care protocol. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2008 Mar. 26 p. [37 references]

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Falls are a leading cause of hospital-acquired injury, and frequently prolong or complicate hospital stays. Falls are the most common adverse event reported in hospitals.

See also the "Incidence/Prevalence" field.

EVIDENCE FOR BURDEN OF ILLNESS

Institute for Clinical Systems Improvement (ICSI). Prevention of falls (acute care). Health care protocol. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2008 Mar. 26 p. [37 references]

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Staying Healthy

IOM DOMAIN

Effectiveness
Safety

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

All adult hospitalized patients

Measurement period is monthly. Data will be submitted within one month following collection period.

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

1,000 patient days

Exclusions

Unspecified

RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

DENOMINATOR (INDEX) EVENT

Institutionalization

DENOMINATOR TIME WINDOW

Time window brackets index event

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

Total number of inpatient falls within 1,000 patient days

Exclusions

Unspecified

MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

NUMERATOR TIME WINDOW

Fixed time period

DATA SOURCE

Medical record

LEVEL OF DETERMINATION OF QUALITY

Not Individual Case

OUTCOME TYPE

Adverse Outcome

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a lower score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Unspecified

Identifying Information

ORIGINAL TITLE

Fall prevalence: rate of inpatient falls per 1,000 patient days.

MEASURE COLLECTION

[Prevention of Falls \(Acute Care\)](#)

DEVELOPER

Institute for Clinical Systems Improvement

FUNDING SOURCE(S)

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COMPOSITION OF THE GROUP THAT DEVELOPED THE MEASURE

Work Group Members: John Degelau, MD (Work Group Leader) (HealthPartners Medical Group and Regions Hospital) (Hospitalist/Geriatrician); John Batsis, MD (Mayo Clinic) (Internal Medicine/Geriatrics); Norman Egger, MD (Mayo Clinic) (Internal Medicine/Geriatrics); Rewati Teeparti, MD (HealthPartners Medical Group and Regions Hospital) (Hospitalist/Geriatrician); Penny Louise Flavin, C-FNP (Olmsted Medical Center) (Nurse Practitioner); Sharon Ferguson, APRN-BC (HealthEast Care System) (Nursing); Niloufar Hadidi, APRN-BC (Fairview Health Services) (Nursing); Carolyn Larsen, PT (Sanford Health) (Physical Therapist); Teresa Huntman, RRT, CPHQ (Institute for Clinical Systems Improvement) (Measurement/Implementation Advisor); Linda Setterlund, MA, CPHQ (Institute for Clinical Systems Improvement) (Facilitator)

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No work group members have potential conflicts of interest to disclose.

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2008 Mar

MEASURE STATUS

This is the current release of the measure.

SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Prevention of falls (acute care). Health care protocol. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2008 Mar. 26 p. [37 references]

MEASURE AVAILABILITY

The individual measure, "Fall Prevalence: Rate of Inpatient Falls per 1,000 Patient Days," is published in "Health Care Protocol: Prevention of Falls (Acute Care)." This document is available from the [Institute for Clinical Systems Improvement \(ICSI\) Web site](#).

For more information, contact ICSI at, 8009 34th Avenue South, Suite 1200, Bloomington, MN 55425; phone: 952-814-7060; fax: 952-858-9675; Web site: www.icsi.org; e-mail: icsi.info@icsi.org.

NQMC STATUS

This NQMC summary was completed by ECRI Institute on June 5, 2009.

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